SECRET

SAPC - 2256 Copy 2 of 5

10 December 1957

Chief, Finance Division

ATTENTION

Monetary Branch

SUBJECT

Disturgment by Treasury Check

It is kirdly requested that a U. S. Treasury Check be drawn in favor of the company listed hereunder in the amount stated, which will be applicable to the contract or agreement shows. The contract number and invoice identification must appear on the check.

Check drawn in fever of: KDOKKTON, GENERAUSEN AND GRIER, INC. 80

August: \$23,231. 300

Contract Number: 78-2191 Invoice Ruber: Bu. Vou. \$10 and \$11

Check to be Dated: 13 December 1957 **®**∘

Pertinent documentation in connection with this classified transaction which has not been included in comptrollers instruction No. 32 (Notice 20-56, after approval by the DCI 15 December 1956), is on file in the Office of the Project Comptroller.

The payment requested is based on progress made by the contractor to date and should be processed against Ceneral Ledger Account No. 138, titled "Disbursements of Appropriated Funds Chargeable to Confidential Funds Allotments - Awaiting DCI Certification." The Allotment Symbol applicable to this request is 7-1004-10-001 (07.9) General Ledger Account No. 600.1.

The check should be dated as stated in paragraph 1 and mailed. in the attached self-addressed envelope. If no envelope is attached, the undersigned should be contacted on extension when payment 18 ready for disposition.

818925 DEC1857

25X1

Authorized Certifying Officer 10 December 1957

SECRET

25X1

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7

Form prescribed by Compttoller General, U. s. Spetember 1, 1950

(Gen. Reg. No. 51, Supp. No. 11) (Amended February 20, 1952)

PERVICES OTHER THAN PERSONAL SERVICES OTHER THAN PERSONAL Bu. Vou. No. Page 1 of 1 (Department, bureau, or establishment) Voucher prepared at PAID BY (Give place and date) THE UNITED STATES, Dr., Payee's Account No. Edgerton, Germeshausen & Grier, Inc. 1622 South "A" Street, Las Vegas, Nevada (Address) No. and Date of Order Date of Delivery or Service ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) UNIT PRICE AMOUNT QUANTITY Discount Terms Invoice Numbers Cost Per Dollars Cts. 10 21,119 91 11 2,111 91 PAYMENT: Complete **Partial** Final Use continuation sheet(s) if necessary Shipped from Weight Government B/L No. I certify that the above bill is correct and just and that payment has not been received. Total 824 (Payee must NOT use this space) (Sign original only) Amount verified; correct for _____ - Title Contract No. TE-2191 (Signature or initials) Req. No. STATrsuant to authority vested in me, I certify that this account is correct and proper for p † Approved for \$_____ STAT SIGN ORIGINAL ONLY IEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional) Check No. ______ dated ______, 19____, for \$______ on Treasurer of the United States in favor of payee named above. Paid by Payee ____ *When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$------,", and (Sign original only)

U. S. (Department, bureau, or establishment) Voucher prepared at (Give place and date) THE UNITED STATES, Dr., Payee's Account No. To Edgerton, Germenheusen & Grier, Inc. (Payee) (Address) (City) (State) ARTICLES OR SERVICES Order Order Order Order Order or Service Order of Services Order Information deemed necessary) Discount Terms Invoice Embers PAID BY Cost Per Dollars Cta	Form pr Comptroller	r General, U.S.		elease 2010/06 VOUCHER FOR VICES OTHER T	PURCHAS	SES AI	VD.				
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No. and Date of Order or Service Cost Per Dollars					-	tate)					
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PAYMENT: Complete Partial Use continuation sheet(s) if necessary Shipped from to Weight Government B/L No. 1 Total (Payee must NOT use this space) Contract for that the above bill is correct and just and that payment has not been received. (Sign original only) Date *Payee ** (This certificate and required when a like certificate in made by payee on attached toll or bills) Amount verified; correct for Signature or initials) Contract No. ** Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$ (Authorized Certifying Officer) By ORIGINAL ONLY Title (Contracting Officer) Title				10						21,119	91
PAYMENT: Complete Partial Use continuation sheet(s) if necessary Shipped from to Weight Government B/L No. 1 Total (Payee must NOT use this space) Contract for that the above bill is correct and just and that payment has not been received. (Sign original only) Date *Payee ** (This certificate and required when a like certificate in made by payee on attached toll or bills) Amount verified; correct for Signature or initials) Contract No. ** Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$ (Authorized Certifying Officer) By ORIGINAL ONLY Title (Contracting Officer) Title				11						2.111	91
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Differences (Sign original only) Date *Payee (This certificate not required when a like certificate is made by payee on attached bill or bills) Per	Shipped from	t				3/L No.	1 1		Total	+m m	00
Date*Payee	I certify that the	above bill is correct		nent has not been receiv		Differen	ces				
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Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$			Title			Amou	ant verified;	correct for	: -		i
† Approved for \$	Contract No. 7	-घ 91	Date	Reg. No.		E	Date .	I	nvoice Rec'	d.	
SIGN ORIGINAL ONLY Title	Pursuant to author	rity vested in me, l	certify that this accoun	t is correct and proper f	or payment.						
By ORIGINAL ONLY (Contracting Officer) Title Date (Approximatevess: This form must be executed when purchases are made or services secured without written agreement in any form	† Approved for \$.				†			30 80	***		
ONLY (Contracting Officer) Title	n						(Authoriza	ed Certify	ing Omcer)		
(Approving everse) and or must be executed when purchases are made or services secured without written agreement in any form	Ву				litle	(Comt	racting	offi	cer)		
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ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)	(Appro	THE EVERSE OF A	FORM MUST BE EXECUTED	WHEN PURCHASES ARE MADE	OR SERVICES SECU	RED WITH	OUT WRITTEN AC	GREEMENT I	N ANY FORM		
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Paid by Check No	writing the company ''John Doe Compan	y or corporate name, a 1y, per John Smith, S	s well as the capacity in wh secretary", or "Treasurer" to approve are combined in	ich he signs, must appear. , as the case may be.	For example:	Per					

the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$_______", and over his official title Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7

THE UNITED S	STATES, Dr.,	1	Give place and Payee's Account No	0				SAPC R	21/3	
			(Payee)					COPY /	Or M	
	(Ad	dress)	(City)		(State)		-			
No. and Date of Order	Date of Delivery or Service	(Enter descrip schedule Discount Terms	ARTICLES OR SER' ption, item number of co b, and other information	ntract or Federal	supply)	QUANTITY	Cost	PRICE	AMOUN	Ct
		Month endi	ing 31 October	1957						
PAYMENT: Complete Partial		Travel Freight &	& Services						\$5,502. 3,915 2,563 2,815 276 4,303 1,743	.96 .09 .12 .02
Final Shipped from		to	Use continuation sheet(s) i	if necessary Government	5/1.31			Total	\$21,119	
) -	(Sign original o	meshausen & Gr	rier, Inc.	Amo		correct fo		F21 119.	
Oursuant to autho	rity vested in me,	I certify that this a	4/26/57 Req.	. No. per for payment.		Date		Invoice Rec'	'd.	
			SIGN ORIGINAL ONLY							
Γitle	THE REVERSE OF T		CUTED WHEN PURCHASES ARE						ı	
	ACCOU	INTING CLASSIFI	CATION (Appropriation	Symbol must be s	hown; otl	ner classificat	tion optio	nal)	•	

*When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example:

"John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

If the ability to certify and authority to approve are combined in one errson, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$______" and over his offi Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7 Standard Form Prescribed by Gomptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal

SADO REITS COPY / OF #

CONTINUATION SHEET

			ARTICLES OR SE	RVICES	OHAN	UNIT	PRICE	AMOUN	T
of Order	Delivery or Service	(Enter description, iter and oth	n number of contra er information dee	act or Federal supply schedule med necessary)	QUAN- TITY	Cost	Per	Dollars	Ct
		Direct Labor Week ending """ """ Month " Total Direct *Materials & S Travel Freight & Exp Other Direct *Burden Total Direct Overhead: Total Direct	10/13/57 10/20/57 10/27/57 10/31/57 Labor Services press Charges	793.32 734.39 722.10 939.42 2,312.77 5,502.00 3,915.96 2,563.09 2,815.12 276.02 4,303.87				\$19,376 1,743 \$21,119	3.8
tober No	n Premiu	*Materials & 1		Vendor Andrews Hardwar Supper Money Electronic Supp Radio & Sound S Las Vegas Bluep Modern Market Alimotor Co. City Janitor Su Neily Electronic K & K Dept. Sto Alamo Airways """ Las Vegas Machi Radio & Sound S McKinley Equipm Réntal P.O.Box Miles R. Hay In	ly upply rint & pply c Suppl re ne upply ent at Dagg	Pho≎o y		15 3 4 27 6 29 9 113 2,000 300 159 47 234	
		21050 21050 21051 21076	2705 2705 2727 2722	Federated Purch " Home Lumber Co: City Janitor Su	ases In	c.		26 58 40	1

VOUCHER "10

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7 Standard Form No. 1035-Revised Form prescribed by Comptroller General, U.S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Personal COPY ZOR

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CONTINUATION SHEET

No. and Date of Delivery or Service		(Bopasses, and a	ARTICLES OR SERV	Sheet No.	1	PRICE	E AMOUNT		
		(Enter description, it and o	em number of contract ther information deem	or Federal supply schedule, ed necessary)	QUAN- TITY	Cost	Per	Dollars	Ct
		P.O. No.	Check Ho.	Vendor					
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	escribed by General, U. S. ber 7, 1950 . 51, Supp. No. 11) ebruary 20, 1952)	r Officer					UD DY
			bureau, or establishment)			1	AID BY
Voucher prep	oared at	.	(Give place and date)				
THE UNITED :			ee's Account No) positive and the second	
							22114
To	ldgerton, G	ermeshausen &	Grier, Inc. (Payee)		.	- COPY	OF 3
			(City) ARTICLES OR SERVICE			UNIT PRICE	AMO
No. and Date of Order	Date of Delivery or Service	schedule, an	, item number of contract d other information deem	c or rederal supply ed necessary)	QUANTITY	Cost Per	Dollar
		Discount Terms	··-		-		
		Period endi	ng 31 October	1957			
							1.
		Fixed Fee					\$2,11
PAYMENT:							
Complete Partial							
Final		Use	continuation sheet(s) if nec	essary			
Shipped from	t	0		Government B/L No.		Total	
certify that the	above bill is correct	t and just and that pay	ment has not been receive	d. '	•	T use this space)	
	<u> </u>	(Sign original only)		Differe			
Date .		me	eshausen & Grie	had hill on hills)			4
			L'actielle.		•	correct for	
Contra		- 4	/26/57 Reg. No.		Date	Invoice Red	
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Approved for 3.			SIGN	1	(Authoriz	zed Certifying Officer)	
By			ORIGINAL ONLY	Title		. 	
r:eL			2	Date		·	
i icie			WHEN PURCHASES ARE MADE				
				ol must be shown; ot			

STAT

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180015-7 Form prescribed by Company of General, U.S. Spriember 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Polic Voucher for Purchases and Services Other Than Personal Services Other Than Personal

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No. and Date h	Date of	ARTICLES OR SERVICES		UNIT	PRICE	AMOUN	T
No. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	Ct
	,	Total Costs billed through 31 October 195 including Bu. Voucher Ho. 10	7			\$108,332	
		Fixed Fee Harned (10, of above)				10,833	.2
		Fixed Fee Previously Billed				8,72	. 2
		Amount of this Voucher				\$ 2,111	1.9
		-					
		"I cortify that the Fixed Fee claimed is contact it is proportionate to the progress	orrect made o	and j n the	ust; a Contra	and	
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